

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Burakhan</i>		<i>03-13-01</i>
O.I.P.E. CLASSIFIER	<i>RSD</i>		<i>3/30/01</i>
FORMALITY REVIEW	<i>KO</i>	<i>305705</i>	<i>03/23/01</i>
RESPONSE FORMALITY REVIEW	<i>Request</i>	<i>925</i>	<i>09-13-01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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1850-550-050  
1/12/01